PTO/SB/06 (12-04)

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ATION FEE DETERMINATION RECORD
Substitute for Form PTO-875 Appl. Seri 09/921620 41061/261991 (1213-003) PATENT APPLICATION FEE DETERMINATION RECORD

ADD'L FEE

<u> </u>			Substitu	ute for Form PT	O-875 App]	<u>. Seri 09</u>	<u>9/921620</u>	14100	1/201991 (1	213-005)
	AF	SMALL ENTITY		OR	OTHER THAN OR SMALL ENTITY					
	FOR	NUMB	NUMBER FILED		NUMBER EXTRA		FEE (\$)		RATE (\$)	FEE (\$)
	SIC FEE CFR 1.16(a), (b), or (c	,,	N/A		N/A			1	N/A	
SEA	ARCH FEE CFR 1.16(k), (i), or (m)		N/A		N/A]	N/A	
EXA	MINATION FEE CFR 1.16(o), (p), or (q		N/A		N/A			Ì	N/A	
TOT	TAL CLAIMS CFR 1.16(i))	16	minus 20	0 = *	0	х =		OR	х =	
IND	EPENDENT CLAIN	^{MS} 4	minus 3	= •	1	х =		1	х =	
APPLICATION SIZE FEE (37 CFR 1.16(s)) If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
MUL	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))					N/A			N/A	
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL			TOTAL	
	APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					SMALL	ENTITY	OR.	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	20	Minus	20	= 0	x =		OR	x =	
	Independent (37 CFR 1.16(h))	* 4=	Minus	4	= 0	x =		OR	x =	
	Application Size Fee (37 CFR 1.16(s))]		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					N/A		OR	N/A	
							0.00	OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
ME	Total (37 CFR 1.16(i))	•	Minus	**	=	х =		OR	х =	
AMENDMENT	Independent (37 CFR 1.16(h))	•	Minus	***	=	x =		OR	х =	
Ä	Application Size Fee (37 CFR 1.16(s))]		
L^{d}	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					N/A		OR	N/A	
					TOTAL		OR	TOTAL		

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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ADD'L FEE

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".